

## **North Carolina Department of Transportation**

Division of Bicycle and Pedestrian Transportation 1552 Mail Service Center, Raleigh, NC 27699-1552 Office (919) 733-2804 • Fax (919) 715-4422 Email: bikeped transportation@dot.state.nc.us



# APPLICATION FOR A **SHARE THE ROAD**

### LICENSE PLATE

#### Remit a \$30.00/60.00 check or money order with this application.

Make checks payable to the N.C. Department of Transportation and mail to address above.

- □ Regular Share the Road **\$30.00**
- Personalized Share the Road \$60.00

  NOTE: You are allowed four spaces for a personalized message.

  | \_\_\_\_\_\_ 1st Choice | \_\_\_\_\_ Alternate

  The personalized spaces can be letters only or a combination of numbers and letters. Numbers only are not permitted.

  The "SR" suffix will be the last letters on the plate.

#### The \$30.00/\$60.00 special fee is an ANNUAL fee due in addition to the regular license fee.

	NAME (To agree with certificate of title)			Please Print Clear	
<b>Home Phone</b>	FIRST	MDDLE		T. A	O.T.
	FIRST	MIDDLE		LA	AST
AREA CODE-TELEPHONE NUMBER					
<b>Business Phone</b>	ADDRESS				
AREA CODE-TELEPHONE NUMBER	CITY	STATE		ZIP (	CODE
E-mail	Current North Carolina				
12 man	Plate Number	V	Vehicle Identification Number		
	Driver License #	Year	Model	Make	Body Sty
I CERTIFY FOR THE MOTOR VE	Owner's Certification of Liabilit	•	NSIBILITY AS R	REQUIRED BY	LAW.
PRINT OR TYPE FULI	. NAME OF INSURANCE COMPANY AUTHO	RIZED IN N.C. – N	OT AGENCY OI	R GROUP	
POLICY NU	JMBER – IF POLICY NOT ISSUED, NAME OF	AGENCY BINDIN	G COVERAGE		
	DATE OF CERTIFICATION				



THIS IS A SAMPLE PENDING APPROVAL 07/05